Approved for use through 10/31/2002. OMB 0561-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

5137DIV (9649/105) Attorney Docket No. First Inventor Bachand et al. LABELLESS, ROLLED FOOD ITEM AND ITS FABRICATION Title

(Only for n	ew nonprovisiona	l applications under 3	C.F.R. 1.53(b))	Express Mail	Label No.	EK 133641	.852 US		
Soo MPER o		ICATION ELEN		ADDF	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231				
1. \(\begin{array}{cccccccccccccccccccccccccccccccccccc	Fee Transmittal Submit an original an Applicant claims See 37 CFR 1.2 Specification preferred arranger Descriptive title of Cross References Statement Regan	Form (e.g., PTO/St d a duplicate for fee proof small entity status. 7. [Tota ment set forth below)	B/17) essing) I Pages 18]	8. Nud (if ap a.					
	or a computer pro	gram listing appendix			ACCOM	PANYING APPI	LICATIONS PARTS		
- - -	Brief Summary of	the Invention of the Drawings (if file	rd)	9. 🗌 10. 🗍	l = ' ' ' - ' ' ' ' ' ' ' ' ' ' ' ' ' ' '				
٠	Abstract of the Di	sclosure		11.	English T	ranslation Docu	ment (if applicable)		
	Prawing(s) (35 U Declaration	• •	I Sheets 2	j 12. ⊠	Statement (IDS)/PTO-1449 Citations				
	~	ed (original or copy)		13. 🖂	13. ☑ Preliminary Amendment 14. ☑ Return Receipt Postcard (MPEP 503)				
b. ⊠	Copy from a pr	e specifically ite	ecifically itemized)						
ا ا	_·	tion/divisional with a OF INVENTOR(S		15.	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
<u>.</u>	Signed stateme	nt attached deleting in ior application, see 37	ventor(s)	16.					
6. 🗌 Apı	plication Data S	heet. See 37 CFR	1.76	17. 🗌					
or in an App Conti Prior app For CONTIN under Box	olication Data Shinuation plication information UUATION or DIVIS 5b. is considered	eet under 37 CFR 1. Divisional on: Examiner	76: Continuation-in- Co	part (CIP) re of the prior anying or divis	of p <i>Gro</i> application, lonal applica	nior application No up / Art Unit: 1761 from which an oa ation and is herek	th or declaration is supplied by incorporated by reference.		
The incorpo	ration <u>can only</u>	be relied upon when	17. CORRESP			Tule Submitted a	pproducti purio.		
☐ Custor	mer Number or Ba	r Code Label	sert Customer No. o	Attach bar cod	e label here)	or 🛛 Co	prespondence address below		
Man-	John O'Toole								
Name	General Mills	, Inc.							
Address	1 General Mil	ls Boulevard, P.O.	Box 1113						
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Country	USA		Telephone	(763) 764	-2422	Fax	(763) 764-2268		
Name (Pi	rint/Type)	John O'Toole		Registration	Registration No. (Attorney/Agent) 28,336				
Signature	,	Athu a	D'5086			Date	1/15/04		

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Attorney Docket No.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

Application Number		
Filing Date		
First Named Inventor	Bachand et al.	
Examiner Name		
Group / Art Unit		

5137DIV (9649/105)

		845-4	WOD OF T	AVMENT /-b	k ana)		T -			EEC C	ALCHI ATION (continued)	
METHOD OF PAYMENT (check one) The Commissioner is hereby authorized to charge					3. ADDITIONAL FEES		FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:					3. ADE	L arge	Large					
		_			 		Fee	Entity Fee	Fee	Entity Fee		Fee
Depo Accor		0.7	-0900				Code	(\$)	Code	(\$)	Fee Description	Paid
Numt		"	-0900			1	105	130	205	65	Surcharge - late filing fee or oath	
							127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
Depo Acco		G∈	eneral Mills				139	130	139	130	Non-English specification	
Name		L					147	2,520	147	2,520	For filing a request for reexamination	
☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17						112	920*	112	920*	Requesting publication of SIR prior to Examiner action		
Applicant claims small entity status. See 37 CFR 1.27						113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
2.	Payme	nt Enc	dosed:				115	110	215	55	Extension for reply within first month	
☐Check ☐ Credit card ☐ Money ☐ Other							116	420	216	210	Extension for reply within second month	
				Order			117	950	217	475	Extension for reply within third month	
1. B	ASIC FI	LING		ALCULATION			118	1,480	218	740	Extension for reply within fourth	
Large	Entity	Small	Entity				128	2,010	228	1,005	Extension for reply within fifth month	
Fee	Fee	Fee	Fee	Fee Description			119	330	219	165	Notice of Appeal	
Code	,	Code	(\$)		_	ee Paid	120	330	220	165	Filing a brief in support of an appeal	
101		201	385	Utility filing fee	Design filing fee			290	221	145	Request for oral hearing	
106 107		206 207	170 265	Design filing fee Plant filing fee				1,510	138	1,510	Petition to institute a public use proceeding	
108	770	208	385	Reissue filing fe	e 🗀		140	110	240	55	Petition to revive – unavoidable	
114	160	214	80	Provisional filling	rovisional filling fee			1,330	241	665	Petition to revive – unintentional	
							142	1,330	242	665	Utility issue fee (or reissue)	
SUBTOTAL (1) (\$) 770						143	480	243	240	Design issue fee		
2. EXTR	A CLAI	M FEE	S				144	640	244	320	Plant issue fee	
			_	Extra F	ee from	Fee	122	130	122	130	Petitions to the Commissioner	
					elow	ree Paid	123	50	123	50	Processing fee under 37 CFR 1.17 (q)	
Total Claim	=	극.	-20 ** =		0 =	0	126	180	126	180	Submission of Information Disclosure	-
Independen Claims	1		-3** =	o x	0 =	0	581	40	581	40	Recording each patent assignment per property (times number of	
Multiple Dependent				×[=	0	146	770	246	385	properties) Filing a submission after final rejection	
Large	Entity			у							(37 ČFR § 1.129(a))	
Fee Code	Fee (\$)	Fee Cod		Fee Descrip	tion		149	770	249	385	For each additional invention to be examined (37 CFR § 1.129(b))	
103	18	203	9	Claims in excess of 20		179	770	279	385	Request for Continued Examination (RCE)		
102	86	202	43	Independent claims in excess of 3						, , , , , , , , , , , , , , , , , , , ,		
104 109	290 86	204	145 43	Multiple dependent claim, if not paid ** Reissue independent claims over			169	900	169	900	Request for expedited examination	
110	onginal patent ** Reissue claims in excess of 20 and					of a design application Other fee (specify)						
				over original			Outer tee (specify)					
SUBTOTAL (2) (\$) 0					*Reduc	ed by Ba	sic Filin	g Fee Pa	aid SUBTOTAL (3) (\$)			
**or numi	her previo	uslv na	id if areater	: For Reissues, se	e ahove							

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	John O'Toole	Registration No. Attorney/Agent)	28,336	Telephone	(763) 764-2422		
Signature	John a.	Jos6		Date	1/15/04		

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